

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		<i>7/7/55</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	<i>7-4-55</i>	<i>12-2-55</i>
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	<i>11-2-55</i>	<i>1-7-56</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
1	<i>8/8/57</i>
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6	<i>9/6/57</i>
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here